Macomb County 4-H Individual Community Service Nomination Form Cover Sheet

Nominee's Name	4-H Age
Club Name	# Years in 4-H
which one is applying plus one previous year	e Ambassador Club for at least two years (the year for ar, which does not have to be consecutive). Nominees urs of community service and should have attended a etings.
pages, single-spaced, single-sided. Number Roman or Arial, leaving one-inch margins all for which you are applying. Attach this page	e completed by the leader, can be no longer than two the questions. Use a 10-point or larger font, Times New around. Include only activities during the program year as a cover sheet. Return completed nominations by omb County, Attn: 4-H, 21885 Dunham Road, Suite 12
To be completed by nominee:	
1. List all the 4-H service activities in which ye	ou have participated.
2. In a paragraph, briefly describe how your a	ctivities have promoted the 4-H program.
3. List all the non-4-H (community/school) ser	rvice activities in which you have participated.
 In a paragraph, describe your most significant it affected you and the community. 	ant (4-H or non 4-H) community service project and how
To Be Completed by the Club Leader: Pleas	se initial each statement.
Records indicate this nominee has con	apleted the required hours of community service.
Records indicate this nominee has bee has attended the required number of C	en a member of the Ambassador Club for two years and Club Meetings.
The information in this application accurate Report and Log Sheets.	rately reflects the information in the applicant's Service
	Date
Leader's Signature	





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